

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	S. Z		11-30-01
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	T. A	844	01/30/02
RESPONSE FORMALITY REVIEW	B. Z	847	01-26-02
	*	72886	07-05-02

INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) ... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Final	Original	Date
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10	N	✓	
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15	N	✓	
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20	✓	✓	
21	✓	✓	
22	N	✓	
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Claim	Final	Original	Date
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70	✓		
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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